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FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

UNIFORM LIMITED OFFERING EXEMPTION

SECTION 4(6), AND/OR

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response . . . 16.00

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Name of Offering (check if t MAP 2004, L.P. limited partners	his is an amendment and name has changed, and indicate ship interests	change.)
Filing Under (Check box(es) that app	oly): Rule 504 Rule 505 Rule 506 S	Section 4(6) ULOE
Type of Filing: New Filing	☐ Amendment	
	A. BASIC IDENTIFICATION DATA	< JUN 30 2004
1. Enter the information requested	about the issuer	
Name of Issuer (check if this	s is an amendment and name has changed, and indicate ch	
•	iber and Street, City, State, Zip Code) Inc., 2555 Park Blvd., Suite One, Palo Alto, CA 94306	Telephone Number (Including Area Code) (650) 324-9095
Address of Principal Business Opera (if different from Executive Offices)	tions: (Number and Street, City, State, Zip Code) Same	Telephone Number (Including Area Code)
Brief Description of Business: inves	t in royalty interests and mineral rights in oil and natur	al gas
Type of Business Organization corporation business trust	☐ limited partnership, already formed ☐ ot ☐ ot ☐ imited partnership, to be formed	ther (please specify): PROCESSED
Actual or Estimated Date of Incorp	Month Year	Actual ⊠ Estimated JUN 1 0 2004 tion for State: DE

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or. if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director □ General and/or Managing Partner Full Name (Last name first, if individual) Mineral Acquisition Partners, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 2555 Park Blvd., Suite One, Palo Alto, CA 94306 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Woodward, Jane Business or Residence Address (Number and Street, City, State, Zip Code) 2555 Park Blvd., Suite One, Palo Alto, CA 94306 Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Davis, Lawrence H. Business or Residence Address (Number and Street, City, State, Zip Code) 2555 Park Blvd., Suite One, Palo Alto, CA 94306 Check Box(es) that Apply: ☐ Beneficial Owner Director ☐ General and/or ☐ Promoter ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Jaszewski, Cheryl Business or Residence Address (Number and Street, City, State, Zip Code) 4580 Point White Drive N.E., Bainbridge Island, WA 98110 Check Box(es) that Apply: ☐ Promoter ☐ Executive Officer Director ☐ Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Cosby, Jonathan W.B. Business or Residence Address (Number and Street, City, State, Zip Code) 2555 Park Blvd., Suite One, Palo Alto, CA 94306 Check Box(es) that Apply: ■ Beneficial Owner ☐ Promoter Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Hall, Stephen M. Business or Residence Address (Number and Street, City, State, Zip Code) 2555 Park Blvd., Suite One, Palo Alto, CA 94306 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Frans, Carolyn Business or Residence Address (Number and Street, City, State, Zip Code) 2555 Park Blvd., Suite One, Palo Alto, CA 94306

B. INFORMATION ABOUT OFFERING													
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									Yes No 🔲 🖾				
2. What is the minimum investment that will be accepted from any individual?								\$50,000					
3. Does the offering permit joint ownership of a single unit?									Yes No				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE													
		name first,				N/A	euror only						
	`	ŕ		,									
Busines	s or Resid	lence Add	ress (Num	ber and S	treet, City,	, State, Zij	Code)		N/A				
Name o	f Associa	ted Broker	or Dealer	•		N/A				· •			
States in	n Which I	Person List	ted Has Sc	licited or	Intends to	Solicit Pu	ırchasers						
· (Ch	eck "All S	States" or o	check indi	vidual Sta	ites)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first,	if individ	ual)		N/A							
Business or Residence Address (Number and Street, City, State, Zip Code) N/A													
Name o	f Associa	ted Broker	or Dealer	•		N/A							_
States in	n Which I	Person List	ted Has Sc	olicited or	Intends to	Solicit Pu	ırchasers						_
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)									All States				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]													

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amou already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchang offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	ge "	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		,
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$400,000,000	\$0
	Other (Specify)	\$	\$
	Total	\$400,000,000	\$0
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings undo Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero."	er te	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$ <u>0</u>
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for a securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12 months prior to the first sale of securities in this offering. Classify securities by type liste in Part C - Question 1.	2) ed	Dollar Amount
	Type of Offering	Type of Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504N/A		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of in this offering. Excluded amounts relating solely to organization expenses of the information may be given as subject to future contingencies. If the amount of an expension furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	e issuer. The penditure is not	<u> </u>
	Printing and Engraving Costs		⋈ \$20,000
	Legal Fees		⋈ \$100,000
	Accounting Fees		⋈ \$25,000
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		
	Total		\$145,000

C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND U	SE OF PROCE	EDS	
 Enter the difference between the aggregate offering C - Question 1 and total expenses furnished in respond difference is the "adjusted gross proceeds to the issue 		\$ <u>399,855,000</u>		
5. Indicate below the amount of the adjusted gross proposed to be used for each of the purposes shown not known, furnish an estimate and check the box to to the payments listed must equal the adjusted gross response to Part C - Question 4.b above.	If the amount for any purpose is the left of the estimate. The total			
Salaries and fees		Paymen Office Directo Affilia	ers, rs, & ates	Payments To Others \$100,000
Purchase of real estate		*		\$ <u>100,000</u>
Purchase, rental or leasing and installation of ma				\$
Construction or leasing of plant buildings and f	• •	-		φ
Acquisition of other businesses (including the vin this offering that may be used in exchange for another issuer pursuant to a merger)	value of securities involved the assets or securities of			\$
Repayment of indebtedness			□	
NI At a state of the state of t		_		•
Working capital				(2)0250 500 0
Other (specify) Management Fee for initial five		. 🗵 😘 30,00	<u>10,000</u> [X]	(2)\$369,500.00
		. 🗆	\$	
Column Totals		⊠ \$30.255	.000 🖂	\$369,600,000
Total Payments Listed (column totals added)	,		\$399 <u>,8</u>	
	DED AL CICALA TUDO			
D. FE.	DERAL SIGNATURE			
The issuer has duly caused this notice to be signed by the unthe following signature constitutes an undertaking by the inwritten request of its staff, the information furnished by the instance of the information furnished by the information f	issuer to furnish to the U.S. Securitie	s and Exchang	ge Commi	ssion, upon
Issuer (Print or Type) MAP 2004, L.P.	Signature Ha	U Date	June <u>3</u>	, 2004
Name of Signer (Print or Type) Mineral Acquisition Partners, Inc., general partner, By: Stephen M. Hall	Title of Signer (Print or Type) Chief Vice President of Administration		ificer and	
				

ATTENTION